

Attorney Docket No.

UNMC.6

Total Pages

(34)

UTILITY

PATENT APPLICATION
TRANSMITTAL

First Named Inventor or Application Identifier

LIN, Ming-Fong

Title: NOVEL PROSTATE CANCER CELL LINES

Express Mail Label No.

EL676441171US

Date Mailed July 31, 2001

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

- | | |
|--|---|
| <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form
(Submit an original, and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification (Total Pages 24)
(preferred arrangement set forth below)</p> <ul style="list-style-type: none">- Descriptive title of the Invention- Cross References to Related Applications- Statement Regarding Fed sponsored R&D- Reference to Microfiche Appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) (Total Sheets 10)</p> <p>4. <input type="checkbox"/> Oath or Declaration (Total Pages)</p> <ul style="list-style-type: none">a. <input type="checkbox"/> Newly executed (original or copy)b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 17 completed)
(Note Box 5 Below)i. <input type="checkbox"/> DELETION OF INVENTOR(S)
Signed Statement attached deleting inventor(s)
named in the prior application, see
37 CFR 1.63(d)(2) and 1.33(b). <p>5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked)
The entire disclosure of the prior application, from which a copy of
the oath or declaration is supplied under Box 4b, is considered as
being part of the disclosure of the accompanying application and is
hereby incorporated by reference therein.</p> | <p>6. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>7. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)</p> <ul style="list-style-type: none">a. <input type="checkbox"/> Computer Readable Copyb. <input type="checkbox"/> Paper Copy (identical to computer copy)c. <input type="checkbox"/> Statement verifying identity of above copies |
|--|---|
- ACCOMPANYING APPLICATION PARTS**

8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
9. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee)	<input type="checkbox"/> Power of Attorney
10. <input type="checkbox"/> English Translation Document (if applicable)	
11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449	<input type="checkbox"/> Copies of IDS Citations
12. <input type="checkbox"/> Preliminary Amendment	
13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
14. <input checked="" type="checkbox"/> Applicant Claims Small Entity Status	
15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	
16. <input type="checkbox"/> Other: _____	

17. a. If a CONTINUING APPLICATION, check appropriate box and supply requisite information.

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of the following application(s), each of which is hereby incorporated herein by reference:

b. Priority Applications

In addition to any applications listed in 17a, the present application also claims priority to the following application(s), each of which is hereby incorporated herein by reference.

18. CORRESPONDENCE ADDRESS

☒ Customer Number 000110 or
DANN, DORFMAN, HERRELL AND SKILLMAN, P.C.
1601 Market Street, Suite 720
Philadelphia, PA 19103-2307
Phone (215) 563-4100 Facsimile (215) 563-4044
to the attention of the individual identified below.


Kathleen D. Rigaut, Ph.D., J.D.
PTO Registration No. 43,047

FEE TRANSMITTAL

Complete if known

Application Number **Not yet assigned**

Filing Date **July 31, 2001**

First Named Inventor **LIN, Ming-Fong**

Group Art Unit

Examiner Name

TOT. AMT. OF PAYMENT: (1)+(2)+(3) = \$ **355.00**

Attorney Docket Number **UNMC.63157**

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to:

- ☐ Charge indicated fees
☒ Charge additional fees
☒ Credit overpayments

to the account of DANN, DORFMAN, HERRELL AND SKILLMAN

Deposit Account Number 04-1406

2. Payment enclosed:

Checks in the amount of \$ 355.00
 Check Nos. _____

FEE CALCULATION

1. FILING FEE

Fee Description	Fee Paid
Utility filing fee	<u>355.00</u>
Design filing fee	_____
Plant filing fee	_____
Reissue filing fee	_____
Provisional filing fee	_____
SUBTOTAL (1)	\$ <u>355.00</u>

2. CLAIMS

	Extra	Fee	Fee Paid
Total Claims Presented <u>11</u> - <u>20</u> = <u>0</u> x <u>9.00</u> = <u>0</u> (a)			
Independent Claims Presented <u>3</u> - <u>3</u> = <u>0</u> x <u>40.00</u> = <u>0</u> (b)			
Multiple Dependent Claim (first presentation) _____ = <u>0</u>			
(a) Enter 20 or number previously paid for			
(b) Enter 3 or number previously paid for			
SUBTOTAL (2)			\$ <u>0</u>

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Fee Description	Fee Paid
Surcharge-late filing fee or oath	_____
Surcharge - late provisional filing fee or cover sheet	_____
Non-English specification	_____
For filing a request for reexamination	_____
Requesting publication of SIR prior to Examiner action	_____
Requesting publication of SIR after Examiner action	_____
Extension for response within first month	_____
Extension for response within second month	_____
Extension for response within third month	_____
Extension for response within fourth month	_____
Notice of Appeal	_____
Filing a brief in support of an appeal	_____
Request for oral hearing	_____
Petition to institute a public use proceeding	_____
Petition to revive unavoidably abandoned application	_____
Petition to revive unintentionally abandoned application	_____
Issue fee	_____
Petitions to the Commissioner	_____
Petitions related to provisional applications	_____
Submission of Information Disclosure Stmt.	_____
Recording each patent assignment per property (times number of properties)	_____
Filing a submission after final rejection (37 CFR 1.129(a))	_____
For each additional invention to be examined (37 CFR 1.129(b))	_____
Other fee (specify) <u>Advance Order (10 copies)</u>	_____
Other fee (specify) _____	_____

SUBTOTAL (3) \$ 0

Submitted By:

Typed or

Printed Name Kathleen D. Rigaut, Ph.D., J.D.

Signature Kathleen D. Rigaut Date July 31, 2001

Reg. Number 43,047

Deposit Account User ID

04-1406